

CZ11 CONFERENCE SPONSORSHIP FORM

(All sponsors, speakers, presenters, posters, moderators, chairs, students, and exhibitors must pay the CZ11 registration fee.)

 Contact name and title (please print or type)

 Organization name as you want it to appear (for CZ11 print and website use)

 Website address (for CZ11 print and website use)

 Address 1

 Address 2

 E-mail

 Phone

 Fax

 Authorizing name, title, and signature for sponsorship

All sponsor funds are payable to the National Fish and Wildlife Foundation (NFWF). To make payments, please email, fax or mail this form and your credit card, check, purchase order or other payment to:

NFWF, C/O Jody Olson, 1133 15th Street, NW, Suite 1100, Washington, DC 20005

Fax: 202-857-0162 ; Phone: 202-595-2481; Email: Jody.Olson@nfwf.org

PAYMENT: I will pay by: Credit card ____ Check ____ Purchase order ____ On-line with Credit card or Paypal ____
 NFWF website for payment: www.NFWF.org/CZ11conference

Credit card information: VISA ____ MasterCard ____ American Express ____
 Card number _____ Expiration _____ Sec. code: _____
 NAME on card _____ Signature _____
 Billing address if different from above _____

I would like to be a general conference sponsor at the following level:

Includes:

____ Platinum	\$35,000	1 exhibit, 3 conference registrations
____ Gold	\$20,000	1 exhibit, 2 conference registrations
____ Silver	\$10,000	1 exhibit, 1 conference registration
____ Bronze	\$ 5,000	1 conference registration (no exhibit)

1) Or I would like to fully or partially sponsor the following event or area (√). Partnerships and partial sponsorships are encouraged and welcomed. Please note amount of sponsorship.

<u>CZ11 NEED</u>	<u>AMOUNT</u>	<u>FULL or PARTIAL Sponsor √</u>	<u>AMOUNT</u>	<u>DATE(s)</u>
____ Exhibit/Poster Reception	\$35,000	Full ____ or Partial ____;	Amount \$____	Monday
____ Wednesday Reception	\$35,000	Full ____ or Partial ____;	Amount \$____	Wed.
____ Lunch (2 seated, 1 poster):	\$35,000 each	Full ____ or Partial ____;	Amount \$____;	M____; Tu____; Th____;
____ Breakfast (4 available):	\$15,000 each	Full ____ or Partial ____;	Amount \$____;	M____; Tu____; W____; Th____;
____ a.m. Coffee Break (4):	\$10,000 each;	Full ____ or Partial ____;	Amount \$____;	M____; Tu____; W____; Th____;
____ p.m. Coffee Break (4):	\$10,000 each	Full ____ or Partial ____;	Amount \$____;	M____; Tu____; W____; Th____;
____ Plenary or keynote speaker(s)	\$10,000 each	Full ____ or Partial ____;	Amount \$____;	
____ Awards, student activities, wi-fi	\$10,000 each	Full ____ or Partial ____;	Amount \$____;	
____ OTHER SPONSORSHIP (indicate interest & amount): _____ \$____				

For questions on CZ11 sponsorship and to submit your organization logo (.eps or .tif file), please contact:

Patmarie Nedelka at phone 301-563-1127 or email: Patmarie.Nedelka@noaa.gov